



Liquor Control Board
Licensing and Regulation
PO Box 43098
Olympia WA 98504-3098
www.liq.wa.gov
360/664-1600
FAX (360) 753-2710

For Office Use Only	
Date	_____
Check	_____
No.	_____
Amount	_____
Rec'd	_____
Rec'd	_____
By	_____
License	_____
No.	_____

Application: Serve Employees or Guests

\$500 fee

For a business that does not hold a liquor license to serve liquor without charge to employees or invited guests (WAC 314-38-010/050).

- ☒ The liquor must be served to employees or invited guests in specified hospitality or dining rooms (the general public cannot be allowed in these rooms while liquor is being served).
- ☒ The liquor cannot be sold in any manner, whether by scrip, donation, or contribution. No charge may be made to the guests for admission to the hospitality or dining rooms, or for any meals or services provided in the rooms.
- ☒ Liquor service cannot be advertised.
- ☒ A class 4 permit holder may serve liquor for no more than 24 hours during any week.
- ☒ The liquor must be purchased at retail.

Name of Applying Business	
Type of Business	
Business Address (Street or Route, City, State, Zip Code)	<input type="checkbox"/> Inside city limits <input type="checkbox"/> Outside city limits
Mailing Address (if different than above):	Phone No: ()
Designated room(s) where liquor will be served	

Partners, Corporate Officers, or Limited Liability Company Members/Managers

Name	Birthdate	Social Security Number	% owned
Home Address (Street, Route, or PO Box, City, State, Zip Code)		Home Telephone No. ()	Title
Spouse Name	Birthdate	Social Security Number	
Name	Birthdate	Social Security Number	% owned
Home Address (Street, Route, or PO Box, City, State, Zip Code)		Home Telephone No. ()	Title
Spouse Name	Birthdate	Social Security Number	
Name	Birthdate	Social Security Number	% owned
Home Address (Street, Route, or PO Box, City, State, Zip Code)		Home Telephone No. ()	Title
Spouse Name	Birthdate	Social Security Number	

(attach additional sheets if necessary)

I declare under the penalties of perjury that the answers contained in this application are true, correct, and complete. The undersigned certifies it is understood that a misrepresentation of fact is cause for rejection of this application or revocation of any permit issued.

Applicant: Keep Pink Copy